

COMPREHENSIVE PLANNING COMMITTEE (CPC) MEETING MINUTES

WEDNESDAY, JANUARY 23, 2019 @ 11:00AM

DC HEALTH-HAHSTA – 899 N. CAPITOL ST. NE; 4TH FLOOR; WASHINGTON, DC 20002

Commissioners	Present	Absent	Administrative Agents	Present	Absent
Baker-Holley, Nathaniel	CC				
Clay, Cyndee	Sabbo	atical	Barmer, David		Х
Copley, Mackenzie, Vice Chair	Х		Simmons, Michelle	CC	
DeMartino, Peter	Х		Puranik, Rashmi	CC	
McBride, Dennis		Х	Agar, Tim	CC	
Morse, Kaleef	Х		Avellanet, Felix	CC	
Padmore, Gerald, <i>Chair</i>	Х		Hayes-Cozier, Ravinia		Х
Shaw-Richardson, Re'ginald	CC				
Zoerkler, Jennifer	CC				
HAHSTA			Planning Commission Staff		
Mohram, Rony	Х		Bailey, Patrice	Х	
Ward, Carroll		Х	Clark, Lamont		Х
HAHSTA/Administrative Agents			Guests		
Barnes, Clover	X				
Edmonds, Jason	Х				
Fortune, Ebony	X				



ACENDA			
AGENDA	Discussion		
Item Call to Order	Gerald P. called the meeting to order at 11:23 am, followed by a moment of silence and introductions.		
Review and Approval of the Agenda	Peter D. motioned to adopt the Comprehensive Planning Commission Agenda for January 23, 2019. Mackenzie C. seconded. The motion was adopted.		
Review and Approval of the Minutes	Mackenzie motioned to approve the Comprehensive Planning Commission Minutes for December 19, 2018. Reginald SR. seconded. The motion was approved.		
Ryan White HIV/AIDS Program (RWHAP) Jurisdictional Reports & Financial Oversight	Suburban Maryland - Gerald P. presented the report. Gerald presented the Suburban Maryland report in the absence of any Maryland representation. Services spending at 30% below expected are none. Services spending at 30% above expected are none. Service areas affected by unprocessed invoices are none. Part A MAI expenditures are at 68.5 % and should be at 75%. Part A expenditures are at 65.2 % and should be at 75%. Northern Virginia - Michelle S. presented the report. Overall spending through November is at 53% for Part A and 79% for MAI. Part A spending is at or near target for Early Intervention Services, Health Insurance Co-Pays, Legal Services, and Outreach. Spending is higher than expected in Linguistic services making it a candidate for reprogramming. Spending is slightly lower than expected in Medical Case Management due to staff vacancies earlier in the grant year. Spending is a lot lower in EFA and Medical Transportation. Vendor agencies have been asked to consider yearend spending in order to bring the spending into compliance. MAI spending is at or near target for Medical Case Management, Substance Abuse and Linguistic Services. MAI spending is higher than expected in Ambulatory Outpatient Medical Care. Savings from other service areas will be reprogrammed to the services of greater need.		
	The majority of the Corrective Action Plan issues, for the MAI provider, have been resolved. Hiring on a few positions, which are still pending, are the only		



remaining issues.

EFA is the only Part A service that is 30% or more underspent.

<u>Washington DC and West Virginia</u> - Rony M. presented the report. For the month of November, (9) of (12) invoices have been received.

Many vendors have experienced issues with processing invoices on the einvoicing platform, which has caused delays in invoice submission.

Service areas affected by unprocessed invoices are Early Intervention Services, Medical Case Management, Home and Community Care, Linguistic Services, and Medical Transportation Services.

District of Columbia Part A expenditures are at 64.2% and should be at 75%.

Services spending 30% below expected are Early Intervention Services, Other Professional Services, Medical Transportation, and Psychosocial Support Services. Services spending at 30% above expected are none.

The service spending 30% below expected is Substance Abuse Services – Outpatient. Services spending 30% above expected are none.

West Virginia Part A expenditures are at 74.4% and should be at 75%.

Recipient report - Clover B. presented the report.

Overall expenditures for Unit Based Cost (UBC) are at 67.7% and is expected to be at 75%. Substance abuse continues to be underspent due to underutilization and billing.

Recipient Report

A new solicitation for entrance into the Ryan White Provider Network for Regional Services closed in the fall of 2018. All 12 of the providers who applied will be awarded new contracts. Providers have been notified and contract negotiations are ongoing.

The HRSA Comprehensive Site Visit is still scheduled for May 21-24, 2019.

Funds allocated to Substance Abuse — Outpatient category for the purchase of Narcan (naloxone) has been moved and the first delivery has arrived. Providers and staff must attend training and proof of training will be required to receive the kits. A list of free scheduled trainings can be found at https://dchealth.dc.gov/page/cme-ceu-webinars-and-trainings.



	The Recipient received the Notice of Grant Award for GY 29. The award amount is \$31,293,011. The Part B award should come shortly. In allocating the award, a percentage of funds, recommended by the Planning Commission, is taken off the top for the EMA. The rest is split by the percentage of the epidemic and the jurisdictions. MAI is split by the percentage of MAI affected people and the jurisdiction.
	Discussion: Are there any plans to spend the DC Part A money that has not been awarded but has been allocated as indicated on page 2 and the impact it may have on health insurance premiums? Are there any plans for the under awarded Medical Nutrition and MCM? And, as it relates to the formula for allocation of the new GY 29 Grant Award, how will money be distributed, now that the administrative agents will not be used?
	Clover explained how DC Part A money had been reprogrammed at the end of last year and Kaleef indicated that all other questions should be saved for COHAH General Body meeting. A full out report on the plan of transition will be given.
Other Business	None
Follow –up Items	None

ANNOUNCEMENTS/OTHER DISCUSSION

None

HANDOUTS

- Comprehensive Planning Committee (CPC) Meeting Agenda dated January 23, 2019
- Comprehensive Planning Committee (CPC) Meeting Minutes, Wednesday, December 19, 2018
- Suburban Maryland Fiscal Narrative Report (Part A and Part A MAI Funding) Year 28 Reporting Period: November 1 through November 30, 2018
- NVRC Fiscal Narrative Report (Part A and Part A MAI Funding) Year 28 Reporting Period: November 1 through November 30, 2018
- Washington DC and West Virginia Monthly Fiscal Narrative Report (Part A and Part A MAI Funding) Year 28 Reporting Period: November 1 through November 30, 2018
- Recipient Report EMA Wide Roll Up CARE Act Part A Grant Year 28, through November 2018

MEETING ADJOURNED	3:57pm	
NEXT MEETING	Wednesday, February 27, 2019	
	11:00 pm – 1:00 pm	
	DC Health-HAHSTA	
WILLTING	899 N. Capitol St., NE, 4 th Floor	
	Washington, DC 20002	